Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF ARKANSAS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Roger First name L Middle name Stricker Last name and Suffix (Sr., Jr., II, III)	Balinda First name Kay Middle name Stricker Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		Kay Stricker
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6095	xxx-xx-9046

Roger L Stricker Debtor 1 **Balinda Kay Stricker** Debtor 2 Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 20513 Nicodemus Church Rd. Siloam Springs, AR 72761 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Benton** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. PO Box 743 Gentry, AR 72734 Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Why you are choosing Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

5:21-bk-71478 Doc#: 1 Filed: 10/20/21 Entered: 10/20/21 13:16:51 Page 3 of 10

	otor 1 Roger L Stricker Balinda Kay Strick	cer				Case r	number (if known)	
Par	t 2: Tell the Court About	Your Bank	ruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			orief description of each, go to the top of page 1 a			C. § 342(b) for Individ	uals Filing for Bankruptcy
	choosing to file under	☐ Chap	ter 7					
		■ Chap	ter 11					
		☐ Chap	ter 12					
		☐ Chap	ter 13					
8.	How you will pay the fee	ab ord a p	out how yo der. If your ore-printed eed to pay	u may pay. Typically, if y attorney is submitting yo address.	you are paying our payment on	the fee yourself, your behalf, you	you may pay with cash r attorney may pay with	r local court for more details n, cashier's check, or money h a credit card or check with ation for Individuals to Pay
		□ Ire bu ap	equest that t is not required plies to you	t my fee be waived (Yo uired to, waive your fee,	u may request and may do so e unable to pay	only if your inco the fee in install	me is less than 150% oments). If you choose	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out a your petition.
9.	Have you filed for	□ No.						
	bankruptcy within the last 8 years?	Yes.						
	•		District	WD-ARK	When	8/14/19	Case number	5:19-bk-72229
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.						
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
11.	Do you rent your	■ No.	Go to li	ine 12.				
	residence?	☐ Yes.	Has yo	ur landlord obtained an	eviction judgme	ent against you?		
				No. Go to line 12.		-		
				Yes. Fill out <i>Initial State</i> this bankruptcy petition.		Eviction Judgme	ent Against You (Form	101A) and file it as part of

5:21-bk-71478 Doc#: 1 Filed: 10/20/21 Entered: 10/20/21 13:16:51 Page 4 of 10

	otor 1 Roger L Stricker btor 2 Balinda Kay Stric	ker			Case number (if known)
Par	t 3: Report About Any Bu	usinesses	You Own	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code
	it to this petition.		Check	k the appropriate box	x to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are o cash-flov § 1116(1	are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to ed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or e choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, low statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C (1)(B).		
	For a definition of small	☐ No.	I am n	ot filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		■ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	r Have Any	/ Hazardo	us Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	the hazard?	
	public health or safety?				
	Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

	tor 1 Roger L Stricker tor 2 Balinda Kay Stric	ker			Case number (if known)
Part			eceive a Briefing About Credit Counseling		
		Abo	out Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.	You	u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	The law requires that you receive a briefing about credit counseling before you file for bankruptcy.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	file. If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you		with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:	_	I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		 ☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			□ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		□ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a		Active duty. I am currently on active military duty in a military

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

combat zone.

of credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver

5:21-bk-71478 Doc#: 1 Filed: 10/20/21 Entered: 10/20/21 13:16:51 Page 6 of 10

	otor 1 otor 2	Roger L Stricker Balinda Kay Strick	ker			Case no	number (if known)	
Par	t 6:	Answer These Questi	ions for Rep	oorting Purposes				
16.		t kind of debts do		Are your debts primarily cons			re defined in 11 U.S.C. § 101(8) as "incurred by	an
			İ	No. Go to line 16b.				
			ı	☐ Yes. Go to line 17.				
				Are your debts primarily busing noney for a business or investr			debts that you incurred to obtain e business or investment.	
			_	☐ No. Go to line 16c.	-			
			I	Yes. Go to line 17.				
			16c. S	State the type of debts you owe	that are not consur	mer debts or bu	usiness debts	
17.		ou filing under oter 7?	■ No.	am not filing under Chapter 7.	Go to line 18.			
	after prop	ou estimate that any exempt erty is excluded and	_ 100.	are paid that funds will be availa			t property is excluded and administrative expen ditors?	ses
		nistrative expenses aid that funds will		□ No				
	distr	ailable for but ibution to unsecured itors?		□ Yes				
18.		many Creditors do	1 -49		1 ,000-5,000		25,001-50,000	
	you o	estimate that you	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000	
			☐ 100-199 ☐ 200-999		□ 10,001-25,0	00	☐ More than100,000	
19.		much do you	□ \$0 - \$50	0,000	\$ 1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion	
		nate your assets to orth?		1 - \$100,000	□ \$10,000,001	- \$50 million	□ \$1,000,000,001 - \$10 billion	
				01 - \$500,000 01 - \$1 million	□ \$50,000,001 □ \$100,000,00		—	
20.		much do you	□ \$0 - \$50		\$ 1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion	
	to be	nate your liabilities ?		1 - \$100,000 01 - \$500,000	□ \$10,000,001		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
				01 - \$1 million	□ \$50,000,001 □ \$100,000,00			
Par	t 7:	Sign Below						
For	you		I have exa	mined this petition, and I declar	e under penalty of p	erjury that the i	information provided is true and correct.	
							igible, under Chapter 7, 11,12, or 13 of title 11, nd I choose to proceed under Chapter 7.	
				ey represents me and I did not I have obtained and read the n			o is not an attorney to help me fill out this (b).	
			I request re	elief in accordance with the cha	pter of title 11, Unite	ed States Code	e, specified in this petition.	
							oney or property by fraud in connection with a o 20 years, or both. 18 U.S.C. §§ 152, 1341, 15	19,
			/s/ Roger	L Stricker			Kay Stricker	_
			Roger L Signature			Balinda Kay Signature of D		
			Executed of	October 20, 2021 MM / DD / YYYY		Executed on	October 20, 2021 MM / DD / YYYY	_

5:21-bk-71478 Doc#: 1 Filed: 10/20/21 Entered: 10/20/21 13:16:51 Page 7 of 10

	Roger L Stricker Balinda Kay Stric	ker	Cas	e number (if known)
If you are no	ot represented by , you do not need	under Chapter 7, 11, 12, or 13 of title 11, for which the person is eligible. I also ce	United States Code, and have e rtify that I have delivered to the oplies, certify that I have no know	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b) ledge after an inquiry that the information in the
, p	go.	/s/ Stanley V. Bond	Date	October 20, 2021
		Signature of Attorney for Debtor		MM / DD / YYYY
		Stanley V. Bond 93034 Printed name		
		Bond Law Office		
		Firm name		
		525 S. School Ave.		
		Suite 100		
		Fayetteville, AR 72701 Number, Street, City, State & ZIP Code		
		Contact phone 479-444-0255	Email address	attybond@me.com
		93034 AR		
		Bar number & State		<u> </u>

Debtor 1	Roger L Strick	er Middle Name	Last Name	
Dalata a O			Last Name	
Debtor 2	Balinda Kay S	tricker		
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number				
Case number				_ 0
if known)				☐ Check if this is an amended filing

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

			Unsecured claim
	What is the nature of the claim?	Educational	\$14,566.00
Aes/nct Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105	As of the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that apply	
	Does the creditor have a lien on yo	ur property?	
	■ No		
Contact	Yes. Total claim (secured an Value of security:	d unsecured)	
Contact phone	Unsecured claim		
	What is the nature of the claim?	13823 Cozy Corner Rd Siloam Springs, AR 72761 Benton County 7 chicken houses with multiple out buildings on 6.39 acres	\$672,807.02
First Financial Bank Po Box 1754 El Dorado, AR 71731	As of the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	: Check all that apply	

B104 (Official Form 104)

12/15

	Does	the creditor have a lien on yo		
		the creditor have a lien on yo	ur property?	
		No		
		Yes. Total claim (secured an	d unsecured)	\$1,438,507.02
		Value of security:	-	\$765,700.00
phone		Unsecured claim		\$672,807.02
	What	is the nature of the claim?	Educational	\$9,667.00
ent				
Bankruptcy			: Check all that apply	
		_		
-Barr, PA 18773				
		None of the above apply		
	Does	the creditor have a lien on yo	ur property?	
		No		
		Yes. Total claim (secured an	d unsecured)	
	_		, -	
phone	_	Unsecured claim		
	What	is the nature of the claim?	Charge Accour	st \$3,300.00
	A 6	the data way file the alaim is	Charle all that analy	
			: Check all that apply	
		_		
do, FL 32896				
		•		
		None of the above apply		
	Does	the creditor have a lien on yo	ur property?	
		No		
		Yes. Total claim (secured an	d unsecured)	
		Value of security:	-	
phone		Unsecured claim		
	Bankruptcy ox 9640 -Barr, PA 18773 phone arrony Bank/Care Credit Bankruptcy Dept ox 965060 do, FL 32896	As of Does Bankruptcy ox 9640 -Barr, PA 18773 Contingent Unliquidated Disputed None of the above apply Does the creditor have a lien on you Value of security: Unsecured claim Unsecured claim Value of the above apply Value of the claim Value of the above apply Value of the claim Value of the above apply Value of security: Value of security: Value of security: Value of security: Value of the claim Value of the above Value of the above	As of the date you file, the claim is: Check all that apply Contingent Contingent Unliquidated Disputed None of the above apply Does the creditor have a lien on your property? No Yes. Total claim (secured and unsecured) Value of security: Unsecured claim What is the nature of the claim? Charge Account Contingent Unliquidated Unliquidated Disputed None of the above apply Does the creditor have a lien on your property? As of the date you file, the claim is: Check all that apply ox 965060 Unliquidated Disputed None of the above apply Does the creditor have a lien on your property? No Value of security: Value of security: Value of security:	

Aes/nct Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105

First Financial Bank Po Box 1754 El Dorado, AR 71731

Grand Savings Bank Pob 451809 Grove, OK 74345

Navient Attn: Bankruptcy Po Box 9640 Wiles-Barr, PA 18773

Santander Consumer USA PO Box 961245 Fort Worth, TX 76161

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Verizon PO Box 660108 Dallas, TX 75266-0107